

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY - REGION 2
Division of Enforcement & Compliance Assistance - Air Compliance Branch (DECA-ACB)
290 Broadway - 21st Floor
New York, NY 10007-1866

NOTIFICATION OF DEMOLITION AND RENOVATION

Operator Project #	Postmark	Date Received	Notification
I. TYPE OF NOTIFICATION (O = Original / R = Revised) : Original			
II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)			
OWNER: New York City Housing Authority			
Address: 23-02 49th Avenue			
City: LIC	State: NY	ZIP: 11101	
Contact: Bane Bermudez		Tel: 718-707-5602	
REMOVAL CONTRACTOR: New York Environmental Systems, Inc.			
Address: 368 Richardson Street			
City: Brooklyn	State: NY	ZIP: 11222	
Contact: Ralph Severino		Tel: 718-302 3500	
Address:			
OTHER OPERATOR:			
Contact:		Tel:	
III. TYPE OF OPERATION (D = Demolition / R = Renovation) : Asbestos Removal, Renovation			
IV. IS ASBESTOS PRESENT? (<u>Yes</u> /No): yes			
V. FACILITY DESCRIPTION (include building name, number and floor or room number): NYCHA - Cypress Hills Houses Apt 6B			
Building Name: Cypress Hills Houses			
Address: 1200 Sutter Avenue			
Address:			
City Brooklyn 11208	State: NY	County: Kings	
Site Location:			
Building Size: 200000	Sq Meter:	Sq Ft:	# of Floors: Age in Years: 50+
Present Use:		Prior Use:	
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL:			
Site Investigation Bulk Sample and PLM / TEM Analysis			
VII. APPROXIMATE OF RACM TO BE REMOVED AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED. SPECIFY THE AMOUNT OF ASBESTOS BELOW:			
	RACM to be Removed	Non-friable Asbestos Material not to be removed Category I Category II	
Pipes - Linear Feet			
Pipes - Linear Meters			
Surface Area - Square Feet	639		
Surface Area - Square Meters			
Volume RACM off Facility Component - Cubic Feet			
Volume RACM off Facility Component - Cubic Meters			
VIII. SCHEDULED DATES OF ASBESTOS REMOVAL: (MM/DD/YY) art: 9/23/2016 Completion: 9/8/2017			
IX. SCHEDULED DATES OF DEMOLITION/RENOVATION: (MM/DD/YY) Start: 9/23/2016 Completion: 9/8/2017			

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:			
Asbestos Floor Tile Removal and Replacement at 1200 Sutter Avenue Apt 6B			
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:			
HEPA Vacum, Wet methods, Negative Air			
XII. WASTE TRANSPORTER #1			
Name: A.T.C. - Asbestos Transportation Company / Tri-State Transfer Associates, Inc.			
Address: 2 Moriches Middle Island Rd / 1199 Randall Avenue			
City: Shirley / Bronx	State: NY	ZIP: 11967 / 10474	
Contact Person: Gary Cretty / Jim Brynef		Telephone: 800-755-0ATC / 718-617-0771	
WASTE TRANSPORTER #2			
Name: New York Environmental Systems, Inc.			
Address: 368 Richardson Street			
City: Brooklyn	State: New York	ZIP: 11222	
Contact Person: Ralph Severino		Telephone: 718-302-3500	
XIII. WASTE DISPOSAL SITE			
Name: Minerva Enterprises, Inc.			
Address: 8955 Minerva Road			
City: Waynesburg	State: OH	ZIP: 44688	
Telephone: 330-866-3435			
XIV. IF DEMOLITION IS ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW			
Name:		Title:	
Authority:			
Date if Order (MM/DD/YY):		Date Ordered to Begin (MM/DD/YY) :	
XV. FOR EMERGENCY RENOVATIONS			
Date and Hour of Emergency (MM/DD/YY):			
Description of the Sudden, Unexpected Event:			
Explanation of How the Event caused Unsafe Conditions or Serious Disruption of Industrial Operation:			
XVI. DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NON-FRIABLE ASBESTOS BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER:			
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THE REGULATION (40CFR PART 61 SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation).			
Signature of Owner/Operator  Ralph Severino		September 8, 2016	
Date		Date	
XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.			
Signature of Owner/Operator 		9/8/16	
Date		Date	

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Contact: Bane Bermudez	Tel: 718-707-5602		
REMOVAL CONTRACTOR: New York Environmental Systems, Inc.			
Address: 368 Richardson Street			
City: Brooklyn	State: NY	ZIP: 11222	
Contact: Ralph Severino	Tel: 718-302 3500		
Address:			
OTHER OPERATOR:			
Contact:			
Tel:			
III. TYPE OF OPERATION (D = Demolition / R = Renovation) : Asbestos Removal, Renovation			
IV. IS ASBESTOS PRESENT? (Yes/No): yes			
V. FACILITY DESCRIPTION (include building name, number and floor or room number): NYCHA - Tilden Houses Apt 5G			
Building Name: Tilden Houses			
Address: 330 Dumont Avenue			
Address:			
City Brooklyn 11212	State: NY	County: Kings	
Site Location:			
Building Size: 200000	SqMeter:	SqFt:	# of Floors: 55
Present Use:		Age in Years:	
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: Site Investigation Bulk Sample and PLM / TEM Analysis			
VII. APPROXIMATE OF RACM TO BE REMOVED AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED. SPECIFY THE AMOUNT OF ASBESTOS BELOW:			
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		Category I	Category II
Pipes - Linear Feet			
Pipes - Linear Meters			
Surface Area - Square Feet	1,015		
Surface Area - Square Meters			
Volume RACM off Facility Component - Cubic Feet			
Volume RACM off Facility Component - Cubic Meters			
VIII. SCHEDULED DATES OF ASBESTOS REMOVAL: (MM/DD/YY) Start: 9/13/2016 Completion: 9/8/2017			
IX. SCHEDULED DATES OF DEMOLITION/RENOVATION: (MM/DD/YY) Start: 9/13/2016 Completion: 9/8/2017			

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:		
Asbestos Floor Tile Removal and Replacement at 330 Dumont Avenue Apt 5G		
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:		
HEPA Vacuum, Wet methods, Negative Air		
XII. WASTE TRANSPORTER #1		
Name: A.T.C. - Asbestos Transportation Company / Tri-State Transfer Associates, Inc.		
Address: 2 Moriches Middle Island Rd / 1199 Randall Avenue		
City: Shirley / Bronx	State: NY	ZIP: 11967 / 10474
Contact Person: Gary Cretty / Jim Brynef	Telephone: 800-755-9ATC / 718-617-0771	
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Name: New York Environmental Systems, Inc.		
Address: 368 Richardson Street		
City: Brooklyn	State: New York	ZIP: 11222
Contact Person: Ralph Severino	Telephone: 718-302-3500	
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_____ Signature of Owner/Operator Ralph Severino		_____ Date September 9, 2016
XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.		
_____ Signature of Owner/Operator		_____ Date 9/9/16